

CITY OF HARRISBURG
DEPARTMENT OF BUILDING AND HOUSING DEVELOPMENT

**APPLICATION FOR CONTRACTOR PARTICIPATION
HOUSING REHABILITATION PROGRAMS**

All questions must be answered in full. If additional space is required, please use separate sheet with the question/section identified.

Name of Company: _____

Soc. Security or IRS Employer ID _____

Address: _____

Office Telephone: _____ Mobile Telephone: _____ FAX: _____

Contact Person: _____ Title: _____

No. years in business: _____. City Mercantile license # _____

City certified (check one or both) MBE: _____ WBE: _____

Indicate type of ownership of your firm:

Sole Proprietorship _____ Partnership _____ Corporation: _____

Non-Profit: ____ (Type): _____ Other: _____ (Explain)

Name(s) of owners: _____ % of Ownership: _____

_____ % of Ownership: _____

Employee Data

Please provide information on all persons employed by your firm, full or part-time, as indicated below, particularly licensed tradesmen (include office staff).

NAME:	M/F:	SKILL/TRADE:	CITY LICENSE #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Number of ethnic/racial minorities employed full-time:_____

What is the area of your firm's specialization/expertise? (Be specific)_____

Evidence of Insurance Coverage

Contractors applying to participate in the City of Harrisburg's Housing Rehabilitation Programs must submit evidence of Insurance Coverage with their application. The following form or your agents' affidavit must be completed and signed by your Insurance Agent, and a Certificate of Insurance, with the City of Harrisburg named as co-insured, mailed or fax copy sent to (717) 255-6421, attention Project Director for Construction. The required coverage limits are attached.

Note: All Contractors and sub-Contractors will hold the City of Harrisburg harmless for all claims wholly arising from their own negligence, and additionally, the City of Harrisburg will be held harmless by the Contractor and sub-Contractors for all injuries experienced by workers on the projects/jobs.

All Contractors and sub-Contractors on any project/job must file, or have on file, a current certificate of insurance with DBHD prior to commencing any work on those projects/jobs. DBHD further requires sixty (60) days written notice of cancellation, non-renewal, significant change or reduction in coverage.

Insurance Agent/Broker's Statement

I have read the Insurance Requirements with the applicant named below:

Applicant's Name: _____

The insurance policies carry the following deductibles: _____

Policy effective date:_____ Policy expiration date:_____

Liability Policies deductibles are: () Occurrence () Claims made

Agent/Broker: _____

Signature: _____

Bonding

All City of Harrisburg construction projects released through DBHD require bonding,

Projects over Ten-thousand Dollars (\$10,000.00)

- Bid Bond or certified check equal to ten percent (10%) of the total price sought/bid.
- Performance/Materials Bond equal to one-hundred percent (100%) of the total bid prices awarded.

Projects under Ten-thousand Dollars (0 to \$9,999.99)

- Bid bond may be required on demand.
- Performance and materials bond may be required on demand.

Sub-Contractor Agreements

All sub-Contractors expecting to participate on any project/job will be listed on the bidding forms supplied for a specific bid package. Those sub-contractors are expected to furnish insurance certificates to DBHD, as well as the primary contractor, indicating their MBE-WBE status and certification with the City of Harrisburg. It is required that all sub-contractors complete and file an Application for Contractors, to be included on our Pre-qualified Contractors/sub-Contractors List.

Drug-Free Work Place Certification

According to the Drug-Free Work Place Act of 1988, all contractors participating in any Housing Rehabilitation Program must file a certificate with DBHD. This form is attached for completion with this application. These forms are also supplied as a part of each bid package.

Job References

List three (3) of the most recently completed jobs as a General Contractor

1. Client Name: _____

Client Address: _____

Client Telephone: _____ Date Completed: _____

Value/Amount of project: _____

Project description: _____

2. Client Name: _____

Client Address: _____

Client Telephone: _____ Date Completed: _____

Value/Amount of project: _____

Project description: _____

3. Client Name: _____

Client Address: _____

Client Telephone: _____ Date Completed: _____

Value/Amount of project: _____

Project description: _____

Contractor Capacity

Please provide the following information on the three most recent projects/jobs managed or performed by your firm:

Project Type	Amount of Project	Start/Compl. Dates	General or sub-Contractor?
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Please provide information on the one largest single project/job your firm has completed in the past twelve (12) months as a General Contractor.

Clients name: _____

Clients Address: _____

Clients Telephone: _____ Date completed _____

Contract amount: \$ _____

Major Supplier References (List three with telephone numbers):

1. _____
2. _____
3. _____

I certify that the above information is true and complete. I understand that false statements are punishable as provided by law. I agree to permit and hereby authorize DBHD to verify all information contained herein, and further, additional information concerning insurance coverage, credit information and including the city's requirements on the Affirmative Action policy.

Contractor signature: _____

Firm Name: _____

Title _____ Date: _____

CERTIFICATION

Drug-free Work Place Act of 1988

41U. S. C. 701, et seq.

54 Fed. Reg. 4946, et seq.

(Contractor name): _____ (hereinafter "Contractor")
certifies that they will provide a drug-free work place by:

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the Contractors work place and specifying the actions that will be taken against the employee(s) for violation of prohibited action.
- (b) Establishing a drug-free awareness program to inform employees about:
 - (1) The dangers of drug use in the work place.
 - (2) The Contractors policy of maintaining a drug-free work place.
 - (3) Any available drug counseling, rehabilitation and employee assistance.
 - (4) The penalties that may be imposed upon employees for violations that occur in the work place.
- (c) Making it a requirement that each employee be engaged in the performance of the project contract, and be given a copy of the statement noted in paragraph (a).
- (d) Notifying the employee in the statement, required by paragraph (a) that, as a condition of employment in the project contract, the employee will:
 - (1) Abide by the terms of the statement and,
 - (2) Notify the Contractor of any criminal drug conviction for a violation occurring in the workplace no later than five (5) days after such conviction.
- (e) Notify the City of Harrisburg, Department of Building and Housing Development (DBHD) within ten (10) days after receiving notice under

Page two (2) – Drug-free work place form

- (f) subparagraph (d) (2) from an employee, or otherwise receiving actual notice of such conviction.
- (g) Taking one of the following actions, within thirty (30) days of receiving notice under subparagraph (d) (2), with respect to any employee so convicted:
 - (1) Taking appropriate personnel action against such employee, up to and including termination, or,
 - (2) Requiring such employee to satisfactorily participate in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State or local health, law enforcement or other appropriate agency.
- (h) Making a good faith effort to continue to maintain a drug-free work place through the implementation of paragraphs (a), (b), (c), (d), (e) and (f).

Signature of Contractor

Date



Stephen R. Reed, Mayor
Harrisburg City Council

City of Harrisburg



Department of Building
and Housing Development
Bureau of Housing
Phone: 255-6428

Financial Privacy Notice

This notice to you is required by law. The Right to Financial Privacy Act of 1978 provides that the City of Harrisburg and U.S. Department of Housing and Urban Development has a right to access certain financial records to determine eligibility for consideration of program participation. Information provided will not be disclosed or related to another Government Agency or Department without your consent except as required or permitted by law.

I/We, hereby authorize the City of Harrisburg, Department of Building and Housing Development to obtain, receive, and access records and information pertaining to credit, including credit reports from persons, companies or firms having such information. This information is for the purpose of determining credit, bonding and insuring capabilities of a participating contractor.

This authorization hereby gives the City of Harrisburg the right to request and obtain information on any matter referred to above. I/We, sign below, agree to make no claim for defamation, violation of privacy, or otherwise against any person, companies or corporation by reason of any statement of information released by them to the City of Harrisburg.

Signature

DBHD Witness

Social Security Number

Title

Owner Name(s) (please print)

Date